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CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. §1.8									BRII	1KS	
I hereby certify that this correspondence, totaling 12 pages including recited attachments, is being facsimile transmitted to the United States Patent and Trademark Office at facsimile no.: 571-273-8300 (Central number)) on the below-gete:										HOF	ĒR
1	_August 21, 2006			e Heliner	Signature:	TANNSU	AVA LOH	уфсө: <i>701</i> / 18	la l	GILS	ON
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In re	Appln. of:	Barne	es et al	l .		į					
Appin. No.:		09/893,240					Examiner: Dixon				
Filed:		June 26, 2001					Art Unit: 3639				
For:		Metho Intern	od and ationa	Apparatus for F I Passenger	ıg an						
Atto	rney Docket	No:	1042	0/17							
Mail Stop Amendment Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450 TRANSMITTAL											
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Ц	Payment by credit card in the amount of \$ (Form PTO-2038 is attached).										
⊠	The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.										
	٠				Respe	ctfully sut	mitted,	J.	H.		
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Date		Anast	asia Heffr	er (Reg. No	. 47,6	338)		-			

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Our Case No. 10420/17

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re	Application of:)			
	Barnes et al.)			
Serial	No. 09/893,240	Examiner Dixon			
Filing	Date: June 26, 2001) Group Art Unit No. 3639			
For	Method and Apparatus for Processing an International Passenger)))			

AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In reply to the Office Action dated June 21, 2006, Applicants have timely filed this Amendment by Certificate of Facsimile Transmission. Applicant respectfully requests the Examiner to withdraw the objections and rejections to this application and to grant allowance of this Application in view of the following remarks and amended claims.

Please amend this application as follows:

In the Claims:

Please amend claims 1, 15, 18, 19 and 23 as follows (the changes in these claims are shown with strikethrough for deleted matter and underlines for added matter). A complete listing of the claims proper claim identifiers is set forth below.